PAGE 1 / 8

Image# 12970758537

**FEC** FORM 3Y

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

1. NAME OF COMMITTEE (in full)  OCPAC  ADDRESS (number and street)  OCPAC  ADDRESS (number and street)  OCPAC  Check if different than previously reported. (ACC)  Check if different than previously reported. (ACC)  CC 020424358  STATE ▲ ZIP CODE ▲  CD 020424358  STATE ▲ ZIP CODE ▲  CD 020424358  STATE ▲ ZIP CODE ▲  COUNTY → NEW (N) OR (AMENDED (N) OR (AMENDED (N) OR	FORIWI SX   F	or Other Than An	Authorized Comm	ittee		Office Use Only	
ADDRESS (number and street)    S76 Pacific Avenue	1. 10 WE OI	TYPE OR PRINT ▼			12FE4M5		
Chack if different than previously reported. (ACC)  PEC IDENTIFICATION NUMBER  C C00424368  3. IS THIS REPORT (Choose One)  (a) Quarterly Report (C1)  Quarterly Report (C1)  Quarterly Report (C1)  Quarterly Report (C1)  Quarterly Report (C2)  October 15  Quarterly Report (O2)  October 15  Quarterly Report (Non-bestetion Non-bestetion Report (Non-bestetion Non-bestetion Non-best	OCPAC						
Check if different than previously reported. (ACC) Willows  2. FEC IDENTIFICATION NUMBER   C C00424368  3. IS THIS REPORT (Choose One)  (a) Quarterly Report (C1)  Quarterly Report (C1)  Quarterly Report (C1)  Quarterly Report (C2)  Quarterly Report (C2)  Quarterly Report (C3)  Quarterly Report (C4)  Report (C5)  Quarterly Report (C4)  Report (C5)  Quarterly Report (C4)  Quarterly Report (C4)  Report (C5)  Quarterly Report (C4)  Report (C6)  Report (C6)  Report (C7)  Quarterly Report (C3)  Report (C6)  Report (C7)  Report (C6)  Report (C7)  Report (C7)  Report (C7)  Report (C6)  Report (C7)  Report (C							
than previously reported. (ACC)  2. FEC IDENTIFICATION NUMBER V  CITY A  STATE A  ZIP CODE A  AMENDED  (A)  4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  Cctober 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Neer Only) (MY)  Report Time (MY)  Report Decided (M2)  Primary (12P)  PRE-Election Convention (12C)  Special (12S)  Convention (12C)  Special (30S)  Report Non-election Report (TER)  Termination Report (TER)  Convention (12C)  Tour on the State of  Stat	ADDRESS (number and street)	976 Pacific Avenue					
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  C C00424358 3. IS THIS REPORT ★ (N) OR AMENDED  (A. TYPE OF REPORT (Choose One)  (a) Ouarterly Reports:  April 15 Quarterly Report (Q1)  Quarterly Report (Q2)  Qclober 15 Quarterly Report (Q2)  Qclober 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Year Only)  Termination Report (TER)  Termination Report (TER)  (d) 30-Day POST-Election General (30G) Runoff (30R) Special (30S) Report for the:  Election on Election on Election Post for the:  Election on Election on Election Special (30S)  Termination Report (TER)  Termination Report (TER)  Termination Report (TER)  Election on Election on Election Special (30S)  Report (Non-election Special (30S) Runoff (30R) Special (30S)  Report (Non-election Special (30S) Special (30S)  Report (N		NAGU			CA		
A. TYPE OF REPORT (Choose One) (a) Quarterly Reports:  April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (Q3) Apra-End Report (Q3) Special (12S)  Guarterly Report (Q3) Termination Report (Q5) Termination Report (Q6) Te		Willows				95988-9788	
A. TYPE OF REPORT (Choose One) (a) Quarterly Reports:    April 15	2. FEC IDENTIFICATION NU	IMBER ▼	CITY 🛦		STATE A	ZIP COD	E <b>_</b>
(Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Coclober 15 Quarterly Report (V2) Quarterly Report (V3) January 31 Year-End Report (V6) July 31 Mid-Year Report (Non-election Year Only) Way PRE-Election Report for the:  Convention (12C) Special (12S)  Covering Period  Covering P	C C00424358					ENDED	
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (YE) July 31 January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)  Termination Report (TER)  Termination Report (TER)  Termination Report (TER)  Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) General (12G) Runoff (12R) Runoff (12R) PRE-Election Report (non-election Year Only) Felection on Report for the:  Termination Report (TER)		Report Due On:					rear Only)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Report (Non-election Year Only) (MY) Termination Report (TER)  Covering Period  Termination Report  Convention (12C)  Report (Non-election Report for the:  Election on  Termination Report (TER)  Termination (12C)  Terminati	(a) Quarterly Reports:	×	Mar 20 (M3)	Jun 20 (M6)			Dec 20 (M12) Non-Election Year Only)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)  Covering Period  M M M O2 O1 O1 2012  Through  Covering Period  Report State of  Termination Report  Covering Period  M M M O2 O1 O1 2012  Through  Covering Period  Report State of  Treasurer  Kelly Lawler  IElectronically Filed  Date  Report to the penalties of 2 U.S.C. §437g.  FEC FORM 3X  Rev. 12/2004		<u> </u>	Apr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)  Discretify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Kelly Lawler  Report for the:  Convention (12C)  Special (12S)  Special (12S)  In the State of  Special (30G)  Runoff (30R)  Special (30S)  Report (70R)  Special (12S)  S	July 15	(C) 12-Day		12P)	General (	(12G) F	Runoff (12R)
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)  Special (30G) Report for the:  Election on  General (30G) Runoff (30R) Special (30S) Report for the:  Election on  Termination Report (TER)  Special (30S) Report for the:  Election on  Election on  Election on  Election on  Through  Date  Type or Print Name of Treasurer  Kelly Lawler  [Electronically Filed]  Date  FEC FORM 3X  Rev. 12/2004  FEC FORM 3X  Rev. 12/2004		Report for th	ne: Convention	n (12C)	Special (	12S)	
July 31 Mid-Year Report (Non-election Report (Non-election Year Only) (MY)  Termination Report (TER)  Termination Report (TER)  Election on  Electio	January 31	_	M M	/ D D /	Y . Y . Y . Y		
Year Only) (MY)  Termination Report (TER)  Report for the:  Election on  Report for the:  Election on  Special (30G)  Report for the:  Election on  Special (30G)  Report for the:  In the State of  State of  Covering Period  O2  O1  O2  O1  O2  O1  Z012  Through  O2  Z9  Z012  I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Kelly Lawler  [Electronically Filed]  Date  O3  POST-Election Report for the:  In the State of  D2  Z012  D3  POST-Election Report for the:  In the State of  D3  Z012  D4  D5  D6  D7  D7  D7  D7  D7  D7  D7  D7  D7	July 31 Mid-Year	(d) 30-Day	accuon on			State of	
Termination Report (TER)  Election on  Election on  State of  State of  Covering Period  O2  O1  ZO12  through  O2  ZO12  through  O2  ZO12  Termination Report  in the State of  State of  Covering Period  O2  ZO12  Termination Report  in the State of  State of  Type or Print Name examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Kelly Lawler  [Electronically Filed]  Date  O3  ZO12  NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  Office  Use  FEC FORM 3X  Rev. 12/2004	Year Only) (MY)	POST-Electi		30G)	Runoff (3	0R) S	Special (30S)
Signature of Treasurer  Kelly Lawler  [Electronically Filed]  Date  Office Use  Og 01 2012 through 02 29 2012  Loretify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Kelly Lawler  [Electronically Filed]  Date  Og 03 2012  POTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  FEC FORM 3X  Rev. 12/2004			M = M	/ D D /	Y		
Type or Print Name of Treasurer  Kelly Lawler  [Electronically Filed]  Date  Date  Office Use  Description:  Kelly Lawler  [Electronically Filed]  Date  Man 20 2012  Possible Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  FEC FORM 3X  Rev. 12/2004	5. Covering Period 02			h 02	/ D D /		
Signature of Treasurer    Electronically Filed   Date   Date   Signature of Treasurer   Signature of Treasurer   Electronically Filed   Date	I certify that I have examined the	is Report and to the be	st of my knowledge a	nd belief it is tru	e, correct and	complete.	
Signature of Treasurer    Kelly Lawler   [Electronically Filed]   Date   03   20   2012	Type or Print Name of Treasure	Kelly Lawler					
Office Use FEC FORM 3X Rev. 12/2004	Signature of Treasurer Kelly	Lawler	[Electroni	cally Filed]	ate 03		
Use Use Rev. 12/2004	NOTE: Submission of false, errone	eous, or incomplete inform	mation may subject the	person signing th	is Report to th	ne penalties of 2 U.	S.C. §437g.

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **OCPAC** 02 2012 02 29 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 23040.15 January 1, 2012 (b) Cash on Hand at 25350.18 Beginning of Reporting Period..... 5000 0 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 25350.18 28040.15 6(a) and 6(c) for Column B)..... 22236 24925.97 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 3114.18 3114.18 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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Re	eport Covering the Period: From: 02	01 2012	To: 02 / 29 / 2012
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees	0	5000
	(i) Itemized (use Schedule A)		
	(ii) Unitemized	0	0
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	0	5000
	Ī		
	(b) Political Party Committees	0	0
	(c) Other Political Committees	0	0
	(such as PACs)(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	0	5000
12.	Transfers From Affiliated/Other		
	Party Committees	0	0
		0	0
13.	All Loans Received		0
14.	Loan Repayments Received	0	0
15.	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0	0
16.	Refunds of Contributions Made to Federal Candidates and Other		
	Political Committees	0	0
17.	Other Federal Receipts		
	(Dividends, Interest, etc.)	0	0
18.	Transfers from Non-Federal and Levin Funds	7 7	
	(a) Non-Federal Account		
	(from Schedule H3)	0	0
	r		
	(b) Levin Funds (from Schedule H5)	0	0
	(c) Total Transfers (add 18(a) and 18(b))	0	0
	(c) Total Hallstels (add To(a) and To(b))		0
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	0	5000
20.	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	0	5000

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     Allocated Foderal/Non Foderal	Total Tills I Gilou	Calcillai Teal-10-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
( )		
(ii) Non-Federal Share	0	0
(b) Other Federal Operating		
Expenditures	2736	2925.97
(c) Total Operating Expenditures	2726	2925.97
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	2736	2925.97
Committees	0	0
. Contributions to		
Federal Candidates/Committees and Other Political Committees	19500	22000
Independent Expenditures		
(use Schedule E)	0	0
. Coordinated Party Expenditures (2 U.S.C. \$441a(d))		
(2 U.S.C. §441a(d)) (use Schedule F)	0	0
Loan Repayments Made	0	0
Leans Made	0	0
Loans MadeRefunds of Contributions To:	7 7	
(a) Individuals/Persons Other Than Political Committees	0	0
Than I ollidar committees		
(b) Political Party Committees	0	0
(c) Other Political Committees		
(such as PACs)	0	0
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0	0
(444 2.1100 20(4), (5), 4.14 (5),		
Other Disbursements	0	0
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0	0
(i) i cuciai Ghaic		
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0	C
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	22236	24925.97
		7
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	22236	24925.97

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0	5000
4. Total Contribution Refunds (from Line 28(d))	0	0
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	5000
3. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2736	2925.97
7. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
3. Net Operating Expenditures (subtract Line 37 from Line 36)	2736	2925.97

**1mage# 12970758542** PAGE 6 / 8

#### : 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: F3XN Transaction ID:

Our committee has low overhead costs and does not maintain a headquarters and has no rent or salaries. Our limited administrative expenses have been reported.

Form/Schedule: Transaction ID:

## S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 7 OF 8	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
	Detailed Summary Page	X 21b 27		23 24 25 26 28b 28c 29 30b	
Any information copied from such Reports and State	mente may not be cold or ::				
or for commercial purposes, other than using the nar	me and address of any politic	al committee to	solicit contribu	utions from such committee.	
NAME OF COMMITTEE (In Full)					
OCPAC					
Full Name (Last, First, Middle Initial)					
A. The Gula Graham Group					
Mailing Address 700 12th Street NW			02	09 2012	
Suite 700			ÜŽ	03 2012	
•	State Zip Code		Transactio	on ID : SB21B-150-399-e	
Washington Purpose of Disbursement	DC 20005-4052		Transasti	511 15 1 552 15 155 555 5	
Fundraising Commission		003	Amount of E	Each Disbursement this Period	
Candidate Name		Category/		2650	
Office Sought: House Disburse	ment For:	Type		2000	
Office Sought: House Disburse Senate	ment For:  Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) <b>B.</b>			Data of Dia	h	
ь.			Date of Dis		
Mailing Address			M = M /	D D / Y Y Y Y	
City	State Zip Code				
Purpose of Disbursement					
			Amount of E	Each Disbursement this Period	
Candidate Name		Category/			
Office Sought: House Disburse	ment For:	Туре			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)  C.			Date of Dis	bursement	
			M = M /	D D / Y Y Y Y Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement	Т				
			Amount of F	Each Disbursement this Period	
Candidate Name		Category/			
Office Sought: House Disburse	ment For:	Type			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)				2650.00	
COSTOTAL OF DISDUISEMENTS THIS Page (optional)		·····			
TOTAL This Period (last page this line number only	)			2650.00	

SCHEDULE B (FEC Form 3X)	lloo	rata ashadula/-\	FOR LINE		·	PAGE	8 O	F 8
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only		<b>X</b> 00		7 05	^
		Summary Page	21b 27	22 28a	23 28b	24 28c	25 29	26 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)		, , , ,						
OCPAC								
Full Name (Last, First, Middle Initial)								
A. National Republican Congressional	National Republican Congressional Committee					ment	YIYI	Y
Mailing Address 320 1st Street SE	Mailing Address 320 1st Street SE					9 2	2012	
•						: SB23-12-4	00-е	
Washington Purpose of Disbursement	DC	20003-1838						
Furpose of Dispursement Federal Contribution  Candidate Name			011	Amount	t of Each	Disbursemer	nt this P	eriod
	Commit	ttoo	Category/	Ι.			150	00
National Republican Congressional Office Sought: House Disbursem	nent For: 2		Туре		- 1	7		
Senate	Primary Other (speci	General						
State: District:								
Full Name (Last, First, Middle Initial)								
B. National Republican Congressional	I Commi	ttee		Date of	Disburse		Y	Y
Mailing Address 320 1st Street SE					09	9	2012	
,	State	Zip Code		Trans	action ID	: SB23-12-4	05-е	
Traeg.e	DC	20003-1838						
Recount Fund	Purpose of Disbursement Recount Fund				of Each	Disburseme	nt this P	eriod
	Candidate Name						45	500
National Republican Congressional			Type		7	7	10	,00
	nent For: 2 Primary	012 General						
President	Other (speci	ify) ▼						
State: District:		Recount						
Full Name (Last, First, Middle Initial)  C.				Date of	Disburse	ment		
					/ D	D / V	YY	V
Mailing Address								
City	State	Zip Code						
Purpose of Disbursement								
Candidate Name			Category/ Type	Amount		Disburseme	-	eriod
	nent For: Primary Other (spec	General ify) ▼	,,		, , , , ,	7		
2.5								
SUBTOTAL of Disbursements This Page (optional)							19500.	00
TOTAL This Period (last page this line number only).							19500.	00